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## APPLICANTS

Allen Jacobs, Reno, NV;

\*\* CONTINUING DATA \*\*\*\*\*

None  
AL

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None  
AL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NV	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>AL</u> Initials				

## ADDRESS

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## TITLE

Traffic control malfunction management unit with co-channel monitoring

FILING FEE  RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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